



OCT 24 = 24 - 00

GAU 1721  
"PATENT" 174

**AMENDMENT TRANSMITTAL FORM**

In re application of: Paul J. Berlowitz, et al. ) Before the Examiner  
 U.S. Serial No. 08/971,254 ) M. Medley  
 This application is a Continuation Prosecution )  
 Application under 37 C.F.R. § 1.53(d) of U.S. Serial No. )  
 08/971,254 filed November 17, 1997  
 For: SYNTHETIC DIESEL FUEL AND PROCESS ) Group Art Unit 1721  
 FOR ITS PRODUCTION )

**ASSISTANT COMMISSIONER FOR PATENTS**  
**Washington, D.C. 20231**

Sir:

"Express Mail" mailing label number EJ234622027US Date of Deposit April 21, 2000.

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Phyllis Taylor

(Typed or printed name of person mailing paper or fee)

*Phyllis Taylor*

(Signature of person mailing paper or fee)

Transmittal herewith is an amendment/response in the above-identified application.

Petition for extension of time pursuant to 37 CFR 1.136 and 1.137 is hereby made, if and to the extent, required. The fee for this extension of time is calculated to be \$ \_\_\_\_\_ to extend the time for filing this response until \_\_\_\_\_.

The fee for any changes in number of claims has been calculated as shown below.

CLAIMS AS AMENDED						
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7)
Total Claims	*	Minus	**		x 18.00	
Indep. Claims	*	Minus	***		x 78.00	
MULTIPLE DEPENDENT CLAIM FEE					\$260.00	
FEE FOR CLAIM CHANGES						

\* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

\*\* If the "Higher Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Higher Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The total fee for this CHANGE OF ATTORNEY'S ADDRESS IN APPLICATION, including claim changes and any extension of time is calculated to be \$ *0*.

Charge \$ *0* to Deposit Account No. 05-1330.

The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17.